

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	TRAFFIC MANAGEMENT IN OPTICAL COMMUNICATION NETWORKS
Attorney Docket Number::	MAHLAB8
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	Uri

Middle Name::	
Family Name::	MAHLAB
Name Suffix::	
City of Residence::	Or Yehuda
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	17/5 Tzealon Street
City of Mailing Address::	Or Yehuda
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	60414
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	Michael
Middle Name::	
Family Name::	GUTIN
Name Suffix::	
City of Residence::	Petach-Tikva
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	6/10 Amir Binyamini Street
City of Mailing Address::	Petach-Tikva
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	49670
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	Boris
Middle Name::	
Family Name::	MALOMED
Name Suffix::	

City of Residence:: Gan-Yavne
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 4/5 Shlomzion Street
City of Mailing Address:: Gan-Yavne
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 70800

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

Domestic Priority Information

Application:: Continuity Type:: Parent Parent Filing
Application:: Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Israel	154647	02/27/03	Yes

Assignment Information

Assignee Name:: ECI TELECOM LTD.
Street of Mailing Address:: 30 Hasivim Street
City of Mailing Address:: Petach Tikva
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 49517